

YOUTH SHELTER CARE

Parent Company: DISCOVERY HOUSE **Phone:** (406) 563-3842
Director Name: GILMARY VAUGHAN **Title:** DIRECTOR
Parent Address: 709 EAST 3RD ANACONDA MT 59711-2501 **800 #:**
Facility Name: DISCOVERY HOUSE **Facility Phone Number:** (406) 563-3842
First Name: GILMARY **Last Name:** VAUGHAN **Title:** DIRECTOR
Contact: CAROL **Last Name:** KOVACICH **Title:** CO DIRECTOR
Address: 709 EAST 3RD ANACONDA MT 59711-2501 **Region:** DEER LODGE
Facility Type: YOUTH SHELTER CARE **Code:** YSC
Number of Residents: 9 **Age Group:** (10-18) **Gender:** MALE & FEMALE
Facility License Number: 7419-001 **Expires:** 06/30/2006 **Licensing Specialist:** BRIDGET PARKER

Parent Company: GREAT FALLS RECEIVING HOME **Phone:** (406) 727-4842
Director Name: LINDA METTHAM **Title:** DIRECTOR
Parent Address: PO BOX 1061 GREAT FALLS MT 59403-1061 **800 #:**
Facility Name: GREAT FALLS RECEIVING HOME **Facility Phone Number:**
First Name: LORI **Last Name:** NELSON **Title:** CONTACT
Contact: **Last Name:** **Title:**
Address: 20 44TH STREET SOUTH GREAT FALLS MT 59405- **Region:** CASCADE
Facility Type: YOUTH SHELTER CARE **Code:** YSC
Number of Residents: 14 **Age Group:** 0 TO 18 **Gender:** MALE AND FEMALE
Facility License Number: 7531-001 **Expires:** 04/30/2007 **Licensing Specialist:** JAN SCHINDELE

Parent Company: MONTANA YOUTH HOMES **Phone:** (406) 449-3038
Director Name: BEAU SNELL **Title:** DIRECTOR
Parent Address: 198 W LYNDAL AVE PO BOX HELENA MT 59624-0153 **800 #:**
Facility Name: MARGARET STUART SHELTER & CHILDREN CRISIS **Facility Phone Number:**
First Name: **Last Name:** **Title:**
Contact: **Last Name:** **Title:**
Address: 200 MILLER ST HELENA MT 59601-5738 **Region:** LEWIS & CLARK
Facility Type: YOUTH SHELTER CARE **Code:** YSC
Number of Residents: 11 **Age Group:** 10 TO 18 **Gender:** MALE & FEMALE
Facility License Number: 6819-002 **Expires:** 01/31/2006 **Licensing Specialist:** BRIDGET PARKER

Parent Company: TED LECHNER YOUTH SERVICES CENTER **Phone:** (406) 256-6825
Director Name: VALARIE WEBER **Title:** DIRECTOR
Parent Address: PO BOX 30856 BILLINGS MT 59107-0856 **800 #:**
Facility Name: TED LECHNER YOUTH SERVICES CENTER **Facility Phone Number:** (406) 256-6825
First Name: VALARIE **Last Name:** WEBER **Title:** DIRECTOR
Contact: VALARIE **Last Name:** WEBER **Title:** DIRECTOR
Address: 410 SOUTH 26TH STREET BILLINGS MT 59102- **Region:** YELLOWSTONE
Facility Type: YOUTH SHELTER CARE **Code:** YSC
Number of Residents: 15 **Age Group:** 12-18 **Gender:** MALE & FEMALE
Facility License Number: 6251-001 **Expires:** 06/30/2007 **Licensing Specialist:** LARRY SHENEMAN

Parent Company: WATSON CHILDRENS SHELTER **Phone:** (406) 549-0058
Director Name: FRAB ALBRECHR **Title:** EXECUTIVE DIRECTOR
Parent Address: 2901 FORT MISSOULA RD MISSOULA MT 59804-2439 **800 #:**
Facility Name: SHELTER CARE HOME **Facility Phone Number:** (406) 549-0058
First Name: FRAN **Last Name:** ALBRECHR **Title:** EXECUTIVE DIRECTOR
Contact: DEBORAH **Last Name:** BAYLOR **Title:** CONTACT
Address: 2901 FORT MISSOULA RD MISSOULA MT 59804-2439 **Region:** MISSOULA
Facility Type: YOUTH SHELTER CARE **Code:** YSC
Number of Residents: 18 **Age Group:** 0-15 **Gender:** MALE & FEMALE
Facility License Number: 3431-002 **Expires:** 06/30/2007 **Licensing Specialist:** MARTY CRAGO

Parent Company: YOUTH CHRISTIAN HOME **Phone:** (406) 323-4444
Director Name: ANTHONY DITONNO **Title:** EXECUTIVE DIRECTOR
Parent Address: 16843 HWY 12 WEST ROUNDUP MT 59072 **800 #:**
Facility Name: YOUTH CHRISTIAN SHELTER CARE HOME **Facility Phone Number:** (406) 323-4444
First Name: ANTHONY **Last Name:** DITONNO **Title:** EXECUTIVE DIRECTOR
Contact: ANTHONY **Last Name:** DITONNO **Title:** CONTACT
Address: 16843 HWY 12 WEST ROUNDUP MT 59072- **Region:** MUSSELSHELL
Facility Type: YOUTH SHELTER CARE **Code:** YSC
Number of Residents: 2 **Age Group:** 10-18 **Gender:** MALE & FEMALE
Facility License Number: 0028033-00 **Expires:** 03/31/2007 **Licensing Specialist:** LARRY SHENEMAN

Parent Company: YOUTH HOMES **Phone:** (406) 721-2704
Director Name: GEOFFREY BIRNBAUM **Title:** DIRECTOR
Parent Address: PO BOX 7616 MISSOULA MT 59807-7616 **800 #:**
Facility Name: BITTERROOT YOUTH HOME **Facility Phone Number:** (406) 721-2704
First Name: CRAIG **Last Name:** KRUEGER **Title:** CONTACT
Contact: CRAIG **Last Name:** KRUEGER **Title:** PARENT COMPANY
Address: 903 S STREET HAMILTON MT 59840-3062 **Region:** MISSOULA
Facility Type: YOUTH SHELTER CARE **Code:** YSC
Number of Residents: 7 **Age Group:** 10-18 **Gender:** MALE & FEMALE
Facility License Number: 7001-011 **Expires:** 06/30/2007 **Licensing Specialist:** MARTI CRAGO

Parent Company: YOUTH HOMES **Phone:** (406) 721-2704
Director Name: GEOFFREY BIRNBAUM **Title:** DIRECTOR
Parent Address: PO BOX 7616 MISSOULA MT 59807-7616 **800 #:**
Facility Name: FLATHEAD YOUTH SHELTER HOME **Facility Phone Number:** (406) 755-4622
First Name: LANCE **Last Name:** ISSAK **Title:** CONTACT
Contact: CRAIG **Last Name:** KRUEGER **Title:** PARENT COMPANY
Address: 430 FOUR MILE ROAD KALISPELL MT 59901-7736 **Region:** FLATHEAD
Facility Type: YOUTH SHELTER CARE **Code:** YSC
Number of Residents: 8 **Age Group:** 10-18 **Gender:** MALE & FEMALE
Facility License Number: 7001-007 **Expires:** 10/31/2006 **Licensing Specialist:** JAN SCHINDELE

Parent Company: YOUTH HOMES **Phone:** (406) 721-2704
Director Name: GEOFFREY BIRNBAUM **Title:** DIRECTOR
Parent Address: PO BOX 7616 MISSOULA MT 59807-7616 **800 #:**
Facility Name: SHIRLEY MILLER ATTENTION HOME **Facility Phone Number:** (406) 549-3836
First Name: CRAIG **Last Name:** KRUEGER **Title:** CONTACT
Contact: CRAIG **Last Name:** KRUEGER **Title:** PARENT COMPANY
Address: 550 N CALIFORNIA STREET MISSOULA MT 59802-3913 **Region:** MISSOULA
Facility Type: YOUTH SHELTER CARE **Code:** YSC
Number of Residents: 12 **Age Group:** 10-18 **Gender:** MALE & FEMALE
Facility License Number: 7001-005 **Expires:** 06/30/2007 **Licensing Specialist:** MARTI CRAGO